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Assistant Commissioner for Patents
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000570 QM12/0501
AKIN GUMP STRAUSS HAUER & FELD LLP
22ND FLOOR ONE COMMERCE SQUARE
2005 MARKET STREET
PHILADELPHIA PA 19103

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Darryl Patcher (Depositor's name)

Darryl Patcher (Signature)

July 21, 2000 (Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
09/079,618	05/15/98	012	PHAN, H	3738 05/01/00
First Named Applicant	GRUNDEI,	35 USC 154(b) term ext. =	0 Days.	

TITLE OF INVENTION FEMUR ENDOPROSTHESIS FOR ARTIFICIAL HIP JOINT
ARTIFICIAL

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
3	8056-80 (E187	623-022.110	L83	UTILITY	YES \$605.00	08/01/00

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 AKIN, GUMP,
2 STRAUSS, HAUER
3 + FELD, L.L.P.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ESKA Implants GmbH & Co.

(B) RESIDENCE: (CITY & STATE OR COUNTRY)

Lübeck, Fed Rep Germany

Please check the appropriate assignee category indicated below (will not be printed on the patent)

☐ Individual ☒ corporation or other private group entity ☐ government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

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The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

Billing# 208056.0080

(Authorized Signature)

W. Schwager

(Date)

7/21/00

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